

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2	/					
3	/					
4						
5						
6						
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35	/					
36	/					
37	/					
38	/					
39	/					
40	/					
41	/					
42	/					
43	/					
44	/					
45	/					
46	/					
47	/					
48	/					
49						
50						
TOTAL IND.	2					
TOTAL DEP.	0					
TOTAL CLAIMS	2					

*	*	*			
IND.	DEP.	IND.	DEP.	IND.	DEP.
51					
52					
53					
54					
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58					
59					
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95					
96					
97					
98					
99					
100					
TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS